

Jason Kander Secretary of State
2013-2014 BIENNIAL REGISTRATION REPORT
NONPROFIT

File Number: 201321980243

N00067375

Date Filed: 08/07/2013

Jason Kander

Secretary of State

☒ I ELECT TO FILE A BIENNIAL REGISTRATION REPORT

REPORT DUE BY: 08/31/2013

N00067375

THE LOOP TROLLEY COMPANY

Musick, III, Don C.

254 Hanley Industrial Court

St. Louis, MO 63144

ORGANIZED UNDER THE LAWS OF:

Missouri

PRINCIPAL PLACE OF BUSINESS OR
CORPORATE HEADQUARTERS:

254 Hanley Industrial Court,

STREET

St. Louis, MO

63144

CITY/STATE

ZIP

If changing the registered agent and/or registered office address, please check the appropriate box(es) and fill in the necessary information.

☐

The new registered agent

IF CHANGING THE REGISTERED AGENT, AN ORIGINAL WRITTEN CONSENT FROM THE NEW
REGISTERED AGENT MUST BE ATTACHED AND FILED WITH THIS REGISTRATION REPORT.

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The new registered office address

Must be a Missouri address, PO Box alone is not acceptable. This section is not applicable for Banks, Trusts and Foreign Insurance.

OFFICERS

NAME AND PHYSICAL ADDRESS (P.O. BOX ALONE NOT
ACCEPTABLE). MUST LIST AT LEAST ONE OFFICER BELOW.

PRES Don C. Musick

STREET/RT Musick Construction Co., 254 Hanley Industrial C

CITY/STATE/ZIP St. Louis, MO 63144

V-PRES Kim Tucci

STREET/RT 1143 Mackland Ave.

CITY/STATE/ZIP St. Louis, MO 63110

SECY Joe Adams

STREET/RT 924 Wild Cherry

CITY/STATE/ZIP St. Louis, MO 63130

TREAS Ben Uchitelle

STREET/RT 41 Crestwood Dr.

CITY/STATE/ZIP St. Louis, MO 63105

NAMES AND ADDRESSES OF ALL OTHER OFFICERS AND DIRECTORS ARE ATTACHED

BOARD OF DIRECTORS

NAME AND PHYSICAL ADDRESS (P.O. BOX ALONE NOT
ACCEPTABLE). MUST LIST AT LEAST THREE DIRECTORS BELOW.

NAME Ben Uchitelle

STREET/RT 41 Crestwood Dr.

CITY/STATE/ZIP St. Louis, MO 63105

NAME Joe Adams

STREET/RT 924 Wild Cherry

CITY/STATE/ZIP University City, MO 63130

NAME Kim Tucci

STREET/RT 1143 Macklind Ave.

CITY/STATE/ZIP St. Louis, MO 63110

NAME Don C. Musick

STREET/RT 254 Hanley Industrial Court

CITY/STATE/ZIP St. Louis, MO 63144

The undersigned understands that false statements made in this report are punishable for the crime of making a false
declaration under Section 575.060 RSMo. Photocopy or stamped signature not acceptable.

Authorized party or officer sign here

Ben Uchitelle

(Required)

Please print name and title of signer:

Ben Uchitelle

/

Treasurer

NAME

TITLE

REGISTRATION REPORT FEE IS:

____ \$20.00 If filed on or before 8/31

____ \$25.00 If filed after 8/31

Corporation will be administratively dissolved if report is not
filed by November 30.

WHEN THIS FORM IS ACCEPTED BY THE SECRETARY OF STATE,
BY LAW IT WILL BECOME A PUBLIC DOCUMENT AND ALL
INFORMATION PROVIDED IS SUBJECT TO PUBLIC DISCLOSURE

E-MAIL ADDRESS (OPTIONAL) _____

REQUIRED INFORMATION MUST BE COMPLETE OR THE REGISTRATION REPORT WILL BE REJECTED

MAKE CHECK PAYABLE TO DIRECTOR OF REVENUE

RETURN COMPLETED REGISTRATION REPORT AND PAYMENT TO: Secretary of State, P.O. Box 1366, Jefferson City, MO 65102

Jason Kander Secretary of State

2013-2014 BIENNIAL REGISTRATION REPORT

NAMES AND ADDRESSES OF ALL OTHER OFFICERS AND DIRECTORS:

DIRECTOR

LES STERMAN
104 UNITED DR
COLLINSVILLE, IL 62234

VICE PRESIDENT

LES STERMAN
104 UNITED DR
COLLINSVILLE, MO 62234